| Case 16-16840 Doc 1 Fill in this information to identify your case: | | Intered 05/18/16 18:50:50 age 1 of 71 | Desc Main |
|---|---|---------------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | | |
| Northern District of: Illinois (State) | <u> </u> | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| P | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | . Your full name | Beth | |
| | | First name | First name |
| | Write the name that is on | Ann | |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's | Jacobellis | |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | . All other names you | Beth | |
| | have used in the last | First name | First name |
| | 8 years | Ann | |
| | | Middle name | Middle name |
| | Include your married or maiden names. | Pols-Jacobellis | |
| | maidernames. | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- <u>6067</u> | xxx - xx- |
| | Security number or | OR | OR |
| | federal Individual Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

ADOC 1 Filed 05/12/8//11/6 Entered 05/18/16 118:50:50 Desc Main Debtor 1 Beth Page 2 of 71 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 200 East Lahon St Number Street Number Street Park Ridge 60068 Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Entered 05/18/16/18/50:50 Desc Main Beth Case 16-16840 ADOC 1 Filed 05/12/8/14/16 Debtor 1 Document Document Page 3 of 71 Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your

Beth Case 16-16840 ADOC 1 Filed 05/128/116 Entered 05/18/16/18/50:50 Desc Main Debtor 1 Page 4 of 71 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? City State Zip Code

Beth Case 16-16840 ADOC 1 Filed 05/128/116 Entered 05/128/116 /128/50:50 Desc Main Debtor 1

Page 5 of 71

Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this about credit bankruptcy petition, and I received a certificate of bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed this counseling agency within the 180 days before I filed this counseling before you bankruptcy petition, but I do not have a certificate of bankruptcy petition, but I do not have a certificate of file for bankruptcy. completion. completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment following choices. If plan, if any. plan, if any. you cannot do so, you are not eligible to I certify that I asked for credit counseling services from I certify that I asked for credit counseling services from file. an approved agency, but was unable to obtain those an approved agency, but was unable to obtain those services during the 7 days after I made my request, and services during the 7 days after I made my request, and If you file anyway, exigent circumstances merit a 30-day temporary waiver exigent circumstances merit a 30-day temporary waiver of the requirement. of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before you obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required filed for bankruptcy, and what exigent circumstances required your creditors can you to file this case. you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your payment plan you developed, if any. If you do not do so, your case may be dismissed. case may be dismissed. Any extension of the 30-day deadline is granted only for cause Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental Incapacity. Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit

counseling with the court.

military combat zone. If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

counseling with the court.

Page 6 of 71 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your **✓** \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Beth Jacobellis Signature of Debtor 2 Signature of Debtor 1 Executed on 5/18/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Filed 05/128/116

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Beth Case 16-16840 ADOC 1

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/18/16 Entered 05/18/16/18/50:50 Desc Main
First Name Document Page 7 of 71

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| iry that the infor | mation ir | i the schedules filed with the petition | IS |
|--------------------|-----------|---|--------------------------------|
| | Date | 5/18/2016 | |
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| State | | Zip Code | |
| | E | mail address | |
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| | Illinois | Date | MM / DD / YYYY Illinois 60603 |

<u> Case 16-16840 Doc 1 Filed 05/18/16 Fntered 05/1</u>8/16 18:50:50 Desc Main Fill in this information to identify your case: Debtor 1 Jacobellis Beth First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$406,000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$4,055.00 1b. Copy line 62, Total personal property, from Schedule A/B \$410,055.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$313,223.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$38,278.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$351,501.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I)

5. Schedule J: Your Expenses (Official Form 106J)

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22, Column A, of Schedule J......

\$5.593.62

\$4,643.00

Beth Case 16-16840 ADOC 1 Filed 05/12/84/11/6 Entered 05/18/16/18:50:50 Desc Main Debtor 1 Page 9 of 71 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$5,494.69 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

\$0.00

\$0.00

\$0.00

\$0.00

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

| | | Case 16-16840 | Doc 1 | Filed 05/18 | /16 Entered | <u>1.05/1</u> 8/16 18:50:50 | Des | c Main |
|-----------------------------------|---------------------------------|---|--|--|---|--|----------------------------|---|
| Fill in this | informa | ation to identify your case: | | | Ų. | | | |
| Debtor 1 | | Beth | Ann | | Jacobellis | | | |
| | | First Name | Middle I | Name | Last Name | | | |
| Debtor 2 (Spouse, | if filing) | First Name | Middle I | Name | Last Name | | | |
| United Sta | ates Ba | nkruptcy Court for the: | Northern | Distr | ict of Illinois | | | |
| Case num | nber | | | | (State) | | | |
| Officia | al Fo | orm 106A/B | | | | | | Check if this is an amended filing |
| | | A/B: Prope | ty | | | | | 12/1 |
| esponsib rrite your Part 1: | name | supplying correct inform and case number (if kno | nation. If more s wn). Answer eve e, Building, I | pace is needed, ery question. _and, or Othe | attach a separate sl r Real Estate Yo | d people are filing together, be heet to this form. On the top of ou Own or Have an Intel nilar property? | of any add | |
| | No. G | o to Part 2 | | | | | | |
| ✓ | Yes. V | Vhere is the property? | | | | | | |
| 1.1 | 0 | - Herry Was Maller | di analan da Car | What is the pr Single-fami | operty? Check all the y home | the amount o | fany secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property. |
| | Street | address, if available, or of 200 East Lahon S | | | nulti-unit building | | | , , |
| | Numb | er Street | | _ | im or cooperative ed or mobile home | Current valuentire prope \$406000.00 | | Current value of the portion you own? \$406000.00 |
| | Park F City Cook Count | State | 60068 Zip Code | Land Investment Timeshare Other | property | interest (suc | h as fee si | your ownership imple, tenancy by estate), if known. |
| | | | | Debtor 1 or Debtor 2 or Debtor 1 ar At least one Other informa | ly d Debtor 2 only of the debtors and ar | rty? Check one. Check in (see ins | tructions) | mmunity property |
| If you | own or | have more than one, list he | ere: | What is the pr | operty? Check all the | at apply. Do not deduc | t secured c | laims or exemptions. Put |
| 1.2 | Street | address, if available, or o | ther description | Condominiu | y home nulti-unit building Im or cooperative ed or mobile home | | no Have Cla ue of the | ed claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| | Numb | er Street State | Zip Code | Land Investment Timeshare Other | property | interest (suc | h as fee si | your ownership imple, tenancy by estate), if known. |
| | | | | Debtor 1 or Debtor 2 or Debtor 1 ar | • | (see ins | f this is co tructions) | mmunity property |

Other information you wish to add about this item, such as local property identification number:

| | Beth Case 16-16840 A DOC First Name Middle Nam | | 6 @&;50: <u>50 Desc Main</u> |
|--|---|---|--|
| 1.3Str | eet address, if available, or other description | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own? |
| Nu Cit | mber Street y State Zip Code | | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, | Check if this is community property (see instructions) |
| | | property identification number: for all of your entries from Part 1, including any entries here | 400000.00 |
| Dort O | Deceribe Your Vehicles | | |
| Do you o you own t 3. Cars, v | hat someone else drives. If you lease a vehicle ans, trucks, tractors, sport utility vehicles, mot o | est in any vehicles, whether they are registered or not? e, also report it on Schedule G: Executory Contracts and Unextorcycles | |
| Do you o you own t 3. Cars, v \vec{V} N | wwn, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle ans, trucks, tractors, sport utility vehicles, mot | e, also report it on Schedule G: Executory Contracts and Unex | |

| | Beth Case 16-16840 A Doc 1 First Name Middle Name | Filed 05/1/8/106 Entered 05/1/8/10 | • E E E E E E E E E E E E E E E E E E E | c Main |
|-----|---|--|---|--|
| 3.3 | Make Model: Year: | Documering Page 12 of 71 Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | |
| | Approximate mileage: Other information: | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Current value of the entire property? | Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the | |
| | Other information: | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | entire property? | portion you own? |
| | tercraft, aircraft, motor homes, ATVs and otl | · · · · · · · · · · · · · · · · · · · | | |
| Exa | mples: Boats, trailers, motors, personal watercra No Yes Make Model: | who has an interest in the property? Check one. | Do not deduct secured cl the amount of any secure | ed claims on Schedule D: |
| Exa | mples: Boats, trailers, motors, personal watercra No Yes Make | aft, fishing vessels, snowmobiles, motorcycle accessories Who has an interest in the property? Check | Do not deduct secured cl the amount of any secure | ed claims on <i>Schedule D:</i> |
| 4.1 | mples: Boats, trailers, motors, personal watercra No Yes Make Model: Year: Approximate mileage: | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured of the amount of any secure Creditors Who Have Clas Current value of the entire property? Do not deduct secured of the amount of any secure | d claims on Schedule D: ims Secured by Property. Current value of the portion you own? aims or exemptions. Put |

Beth Case 16-16840 ADOC 1 Filed 05/12/2/16 Entered 05/12/2/16/16/2/20:50 Desc Main

Debtor 1 Page 13 of 71 **Describe Your Personal and Household Items** Part 3: Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ✓ Yes. Describe... Used Furniture and Household Goods \$1000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Nο Yes. Describe... Used Electronics, Computers and Televisions \$750.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **V** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **✓** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used Clothing and Footwear \$1000.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver **~** No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses **☑** No Yes. Describe...

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/18/16 Entered 05/18/16 (18/50:50 Desc Main

First Name Document Page 14 of 71

Describe Your Financial Assets

Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: Chase Checking \$800.00 17.2. Checking account: 17.3. Savings account: Chase Savings 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

| Deb | otor 1 Beth Case 10 First Name | <u>0-16840</u> A b∂ 0C 1 I Middle Name | FIIEO US/acodello Entereo Usalello (ilkovio U:50 | Desc Main |
|-----|--|--|---|--------------|
| 00 | | | Document Page 15 of 71 | |
| 20. | Negotiable instruments i | nclude personal checks, cashie | otiable and non-negotiable instruments ers' checks, promissory notes, and money orders. fer to someone by signing or delivering them. | |
| | Yes. Give specific information about them | Issuer name: | | |
| | | | | |
| 21. | | | B(b), thrift savings accounts, or other pension or profit-sharing plans | |
| | ∐ No | Type of account: | Institution name: | |
| | ✓ Yes. List each account separately. | 401(k) or similar plan: | 401(k) with employer | \$500.00 |
| | | Pension plan: | | |
| | | IRA: | | |
| | | Retirement account: | | _ |
| | | Keogh: | | |
| | | Additional account: | | |
| | | | | |
| 22. | Security deposits and | Additional account: | | |
| 22. | Your share of all unused Examples: Agreements companies, or others | deposits you have made so that | you may continue service or use from a company iblic utilities (electric, gas, water), telecommunications | |
| | ✓ No | | Institution name: | |
| | Yes | Electric: | | |
| | | Gas: | | |
| | | Heating oil: | | |
| | | Security deposit on rental uni | it: | |
| | | Prepaid rent: | | <u> </u> |
| | | Telephone: | | |
| | | Water: | | |
| | | Rented furniture: | | |
| | | Other: | | |
| 23 | Annuities (A contract to | | to you, either for life or for a number of years) | |
| _0. | No No | . a pondalo paymont di money i | as you, said for mo or for a marrisor of yours, | |
| | Yes | Issuer name and description: | | |
| | | | | |
| | | | | |
| | | | | |

| Debt | or 1 | Beth First Na | Ca | <u>se</u> | 16 | -168 | 40 | | oc 1 | | | | <u>408/41/6</u> | | Entere | | | 116 | (i 1 k8 | ⊌50: <u>5</u> | 50 | De | sc Ma | in | | |
|------|----------|---------------------------------|---------|--------------|-----------------|---------------------------------------|-----------------|---------|---------|--------|------------|----------|-----------------|------|----------------------------|--------|-----------|-------|----------------|---------------|--------|----------|---|-------------------|-------------|---|
| 24. | | | | | | on IRA 529A(b | | | | in a c | ualifie | d ABI | E progra | am | n, or under | a qu | alified s | tate | tuitie | on pro | gram. | | | | | |
| | | No Yes | | nstit | ution | name | and d | lescrip | tion. S | Separa | ately file | e the re | ecords of | any | y interests.1 | I1 U.S | S.C. § 52 | 21(c) | : | | | | | | | |
| 25. | | sts, ed rcisab | - | | | | terest | ts in p | ropei | rty (o | ther th | an an | ything lis | ste | ed in line 1) |), and | rights | or p | ower | s | | _ | | | | |
| | | No Yes. [| Descr | ibe | | | | | | | | | | | | | | | | | | | | | | |
| 26. | Еха | | Interr | net d | loma | | | | | | | | lectual pi | | perty ng agreeme | ents | | | | | | | | | | |
| 27. | Еха | | | | | and oth | | | | | | ssocia | ition holdi | ing | s, liquor lice | enses | , profess | siona | al lice | nses | | | | | | |
| | | Yes. [| Descr | ibe | . [| | | | | | | | | | | | | | | | | | | | | |
| Mor | iey (| or pr | opeı | rty | owe | ed to | you? | ? | | | | | | | | | | | | | | p | urrent ortion o not ded aims or ex | you o uct secu | wn? ured | е |
| 28. | Tax ı | refunc | ls ow | ed to | o yo | u | | | | | | | | | | | | | | | | | | | | |
| | | Yes. G a y | bout to | them eady | , incl filed | ormatic luding v d the re | vhethe turns | er | | | | | | | | | | | Fede State: | : | | | | | | |
| 29. | | ily su _l nples: l | | | or lun | np sum | alimo | ny, spo | ousal | suppo | ort, child | d supp | ort, mainte | ena | ance, divord | e set | lement, | | | | ent | | | | | |
| | V | No | | | | | | | | | | | | | | | | | Alimo | .n | | | | | | |
| | □, | Yes. G | ive sp | ecifi | c info | ormatio | n | | | | | | | | | | | | Alimo Maint | tenance | e: | | - | | | |
| | | | | | | | | | | | | | | | | | | | Supp | ort: | | | | | | |
| | | | | | | | | | | | | | | | | | | | Divor | ce settl | ement: | | | | | |
| | | | | | | | | | | | | | | | | | | | Prope | erty sett | lement | t: | | | | |
| | | nples: | Unpai | id wa | ages | e owe , disabil , benefi | lity ins | urance | | | | - | | k pa | ay, vacation | pay, v | vorkers' | com | pensa | ation, | | | | | | |
| | ✓ | No | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Yes. D | escrit | ое | | | | | | | | | | | | | | | | | | | | | | |

| Deb | tor 1 | Beth First Na | Case | e 16 | 6-16840 | A DOC 1 Middle Name | | d 05/1/8/1/6 cumethtee | | e <u>red</u> 05/18 17 of 71 | 8/11-6 (ilk | 8⊌ 5 0: <u>50</u> | Des | sc Main |
|------|-------------------------|------------------|------------------------|----------------|--------------------------------|----------------------------------|---------------------|--|--------------|--------------------------------|--------------|--------------------------|-----------------|--|
| 31. | | | | | policies ility, or life in: | surance; healtl | | account (HSA); c | Ū | | iter's insur | ance | | |
| | $\overline{\mathbf{A}}$ | | | | ance compa st its value | , | Company Northwes | rname: stern Mutual Term | n Life | | Benef | iciary: | | Surrender or refund value: \$0.00 |
| 32. | If you prop | u are therty be | ne benef cause so | iciary omeo | • | e you from so ust, expect pro | | /ho has died m a life insurance | policy, or a | re currently enti | itled to rec | eive | | |
| | | | escribe. | | | | | | | | | | | |
| 33. | Exar | mples: No | | ts, em | | | | ed a lawsuit or n s, or rights to sue | nade a de | mand for paym | nent | | | |
| 34. | | | tingent claims | and | unliquidate | d claims of e | very natu | ıre, including co | ounterclai | ms of the debt | or and rio | ghts | | |
| | ✓ | No Yes. D | escribe. | | | | | | | | | | | |
| 35. | | | ial asse | ts yo | u did not al | ready list | | | | | | | | |
| | | No Yes. D | escribe. | | | | | | | | | | | |
| 36. | | | | | - | | | cluding any enti | _ | | | | | \$1305.00 |
| Part | 5: | Desc | ribe A | ny E | Business- | Related Pro | operty \ | ou Own or H | lave an | nterest In. l | List any | real esta | ate in F | Part 1. |
| 37. | | | | | | | | / business-relate | | | | | | |
| | | | o to Part o to line | | | | | | | | | | po Do | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Acc | ounts | receivat | ole or | commission | ons you alread | dy earned | I | | | | | | |
| | | No Yes. D | escribe. |] | | | | | | | | | | |
| 39. | | | | | | d supplies ers, software, n | nodems, p | orinters, copiers, fa | ax machine | es, rugs, telepho | nes, desk | s, chairs, ele | ctronic d | devices |
| | | No Yes. D | escribe. |] | | | | | | | | | | |

| | or 1 Beth Case 10 First Name | Mic | Documet Name Documet Name | Page 18 of 71 | Desc Main |
|--------------|---------------------------------------|---|--|---|------------------------------|
| 40. | Machinery, fixtures, eq | uipment, supplie | es you use in business, and tool | s of your trade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 42. | Interests in partnershi | ips or joint vent | ures | | |
| | ✓ No | | | | |
| | Yes. Give specific | | Name of entity: | % of ownership: | |
| | information about | | | | <u> </u> |
| | them | | | | |
| | | | | | |
| 43. C | Customer lists, mailing | lists, or other co | ompilations | | <u> </u> |
| | ✓ No | , | , p | | |
| | | clude personally i | dentifiable information (as defined in | n 11 U.S.C. & 101/41A))? | |
| | | siddo poroonally il | | | |
| | ∐ No | | | | |
| | Yes. Descr | ibe | | | |
| 44. | Any business-related p | property you did | not already list | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | • | from Part 5, including any entric | es for pages you have attached | |
| Part | 6: Describe Any F | Farm- and Con | mmercial Fishing-Related | Property You Own or Have an Interest Ir | 1. |
| 46. | Do vou own or have a | nv legal or equit | able interest in any farm- or com | mercial fishing-related property? | |
| | No. Go to Part 7. | . • | • | | Current value of the |
| | Yes. Go to line 47. | | | | portion you own? |
| | | | | | Do not deduct secured claims |
| | | | | | or exemptions |
| 47. | Farm animals Examples: Livestock, por | ultry farm-raised (| ich | | |
| | | any, ranni-raiseu i | וטו | | |
| | ✓ No | | | | 1 |
| | Yes. Describe | | | | |

| Deb | tor 1 | Beth Case 16 First Name | 6-16840 | Alboc 1 Middle Name | Filed 05/ Docum | | Entered 05/e Page 19 of 7 | 18/16/168/50: <u>50</u> 1 | Desc | Main |
|--------------|----------|--------------------------------|------------------|------------------------|--------------------|-----------------------|------------------------------|------------------------------|------------------|-------------|
| 48. | Cro | ps-either growing | or harvested | | Docum | ici it | rage 19 01 7. | L | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | _ | |
| 49. | Far | m and fishing equi | pment, impler | ments, mach | inery, fixtures, | and tools | of trade | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | _ | _ |
| 50. | Far | m and fishing supp | lies, chemica | ls, and feed | | | | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | | |
| 51. | Any | farm- and comme | rcial fishing-re | elated proper | ty you did not | already lis | st | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Describe | | | | | | | _ | |
| 50.4 | | | | f B | 0 la ala Para | | | -44b1 | | |
| | | | | | _ | - | for pages you have | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Part 53. | | you have other pro | | | | | nat You Did Not L | _ist Above | | |
| 55. | | mples: Season tickets | | | iot aiready list | • | | | | |
| | ✓ | No | | | | | | | | |
| | | Yes. Give specific information | | | | | | | | |
| | | mormation | | | | | | | | |
| | | | | | | | | | | |
| 54. A | dd th | ne dollar value of al | l of your entri | es from Part | 7. Write that n | umber her | 'e | | > | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Part | 8: | List the Totals | of Each Pa | rt of this F | orm | | | | | |
| 55. F | Part 1 | 1: Total real estate, | line 2 | | | | | ▶ | | \$406000.00 |
| 56. r | part 2 | 2 total vehicles, line | 5 | | | | | | | |
| 57. P | Part 3 | : Total personal an | d household i | items, line 15 | 5 | \$2750.00 | | | | |
| 58. P | Part 4 | : Total financial ass | ets, line 36 | | | \$1305.00 | <u> </u> | | | |
| 59. F | Part 5 | 5: Total business-re | elated propert | y, line 45 | | | | | | |
| 60. F | Part 6 | 6: Total farm- and fi | ishing-related | l property, lin | ne 52 | | | | | |
| 61. F | Part 7 | 7: Total other prope | erty not listed, | line 54 | | | | | | |
| 62. 7 | Total | personal property. | Add lines 56 th | rough 61 | | \$4055.00 | | | | + \$4055.00 |
| | | | | | | \$.500.00 | | Copy personal property to | otal > | |
| | | | | | | | | | | \$410055.00 |
| 63. T | otal | of all property on S | chedule A/B. | Add line 55 + | line 62 | | | | | |

| E:II : | : 4b:: : f | Case 16-16840 | Doc 1 Filed 05/ | 18/16 Entered 05/1 | 8/16 18:50:50 | Desc Main |
|---|--|--|---|--|---|---|
| | in this inform otor 1 | ation to identify your case: Beth | Ann | Jacobellis | | |
| | otor 2 | First Name | Middle Name | Last Name | | |
| | ouse, if filing) ted States Ba | | Middle Name orthern D | Last Name istrict of Illinois | | |
| | se number nown) | | | (State) | | |
| | | orm 106C | | | | Check if this is a amended filing |
| | | C: The Prope | rtv You Claim | as Exempt | | 12/1 |
| For is to exe rece exe pro | each iten o state a s mpted up eive certa mption of perty is d t1: Ident Which set | pecific dollar amount to the amount of any in benefits, and tax-ex 100% of fair market v etermined to exceed t | n as exempt, you must as exempt. Alternative applicable statutory compt retirement fundalue under a law that hat amount, your exelaim as Exempt | st specify the amount of ely, you may claim the full limit. Some exemptions as—may be unlimited in limits the exemption to mption would be limited and your spouse is filing with you. | ull fair market value —such as those for dollar amount. How a particular dollar to the applicable s | r health aids, rights to wever, if you claim an amount and the value of the |
| | | e claiming state and rederal ric e claiming federal exemptions | | 0.0.0. § 022(b)(0) | | |
| 2. | For any pr | operty you list on Schedule | A/B that you claim as exe | mpt, fill in the information belo | ow. | |
| | | ription of the property and lle A/B that lists this prope | | Amount of the exemption you Check only one box for each ex | · | cific laws that allow exemption |
| | Brief description | Chase Savings | \$5.00 | 7 | | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A | | | \$5.00 100% of fair market value, to applicable statutory limit | up to any | |
| | Brief description | Chase Checking | \$800.00 | V | | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A | | | \$800.00 100% of fair market value, u applicable statutory limit | | |
| 3. | (Subject to | • | ery 3 years after that for case | ? s filed on or after the date of adjus 1,215 days before you filed this o | , | |

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/18/16 Entered 05/18/16 (188:50:50 Desc Main First Name Documentum Page 21 of 71

| t2: Addition | nal Page | | | |
|--|--|---|--|------------------------------------|
| • | ion of the property and line A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| Brief description: Line from Schedule A/B: | Northwestern Mutual Term Life | \$0.00 | 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(f) |
| Brief description: Line from Schedule A/B: | 401(k) with employer | \$500.00 | \$500.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1006 |
| Brief description: Line from Schedule A/B: | 200 East Lahon St, Park Ridge, IL 60068 | \$406,000.00 | \$15,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-901 |
| Brief description: Line from Schedule A/B: | Used Furniture and Household Goods | \$1,000.00 | \$1,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Line from Schedule A/B: | Used Electronics, Computers and Televisions | \$750.00 | \$750.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Line from Schedule A/B: | Used Clothing and Footwear | \$1,000.00 | \$1,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) |

| | | Case 16-16840 | Doc 1 Filed (| 05/18/16 | Entered 05/18/ | /16 18:50:50 | Desc Main | |
|------------------------|---|---|--|----------------------------|---|---|--|-----------------------------------|
| Fill in | this inform | ation to identify your case: | | | J | | | |
| Debto | or 1 | Beth First Name | Ann Middle Name | Jacobe Last Na | | | | |
| Debto (Spou | | First Name | Middle Name | Last Na | | | | |
| United | d States Ba | ankruptcy Court for the: <u>No</u> | orthern | District of Illi | inois State) | | | |
| Case (If kno | number wn) | | | | | | | |
| Offi | cial F | orm 106D | | | | | | eck if this is a ended filing |
| Sch | nedu | le D: Creditor | 's Who Hav | ve Clain | ns Secured | by Prope | rty | 12/1 |
| corre form. 1. [| ct inform On the Do any cre | ete and accurate as pormation. If more space top of any additional ditors have claims secured neck this box and submit this for all in all of the information below | is needed, copy t pages, write your by your property? orm to the court with you | he Additiona name and c | al Page, fill it out, i ase number (if kno | number the entricown). | • | |
| Part 1 | List A | All Secured Claims | | | | | | |
| С | laim. If moi | ured claims. If a creditor has re than one creditor has a par t the claims in alphabetical or | ticular claim, list the other | er creditors in Pa | • | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| <u> </u> | CENTRAL Creditor's Na 1 501 S MA | | Describe the propert | y that secures t | the claim: | \$313,223.00 | \$406,000.00 | \$0.00 |
| | Number | Street | 360 Mortgage As of the date you file | e, the claim is: | Check all that apply. | | | |
| <u>R</u> | ITTLE | Arkansas 72202 | Contingent Unliquidated | | | | | |
| _ | ity Vho owes Debtor | State ZIP Code the debt? Check one. 1 only | Disputed Nature of lien. Check | all that apply. | | | | |
| Ī | Debtor Debtor | 2 only 1 and Debtor 2 only | car loan) | · | mortgage or secured | | | |
| | At least another | one of the debtors and | Statutory lien (suc | | cnanic's lien) | | | |
| | commi | if this claim relates to a unity debt vas incurred 2/1/2014 | Other (including a | _ | 6915 | | | |
| L | | vas incurred <u>2/1/2014</u> Add the dollar value of you | Last 4 digits of acco | | | \$313,223.00 | | |
| | | here: | ii entries in Column A | on uns page. \ | wite that number | φυ10,220.00 | | |

| Fill in | this informa | Case 16-16840 | | iled 05/18/16 | Entered 05 | <u>/1</u> 8/16 18:50:50 | Desc | Main | |
|---|---|--|---|---|---|---|--|--|--|
| Debto | | Beth First Name | Ann Middle Na | Jacob me Last N | | - | | | |
| Debto (Spou | | First Name | Middle Na | | | | | | |
| | | nkruptcy Court for the: | Northern | District of II | linois State) | | | | |
| (If kno | | | | | | | | | |
| | | orm 106E/F | d:40 no \A/k | a Haya H | | d Claima | Chec | ck if this is an | amended filing |
| <u> </u> | neau | le E/F: Cre | aitors vvr | 10 Have U | nsecure | d Claims | | | 12/15 |
| party t 106A/I are list the bo | to any exect B) and on S ted in Sche exes on the | cutory contracts or une Schedule G: Executory edule D: Creditors Who | xpired leases that c Contracts and Une o Hold Claims Secu quation Page to this | ould result in a claim expired Leases (Officined by Property. If managed page. On the top of a | . Also list executor al Form 106G). Do ore space is neede | 2 for creditors with NOI y contracts on Schedul not include any credito id, copy the Part you ne es, write your name an | le A/B: Prop rs with parti ed, fill it out | erty (Officia ally secured , number th | Il Form I claims that e entries in |
| 1. | | ditors have priority unso to Part 2. | secured claims agai | nst you? | | | | | |
| | identify wha possible, lis Part 1. If mo | t type of claim it is. If a cla | aim has both priority a al order according to ds a particular claim, l | nd nonpriority amounts the creditor's name. If y list the other creditors in | , list that claim here a you have more than t n Part 3. | i, list the creditor separate and show both priority and two priority unsecured cla | nonpriority a | amounts. As r | much as |
| | | | | | | | Total claim | Priority amount | Nonpriority amount |
| | | | | | | | | | |

Case 16-16840 ADOC 1 Filed 05/12/8/11/6 Entered 05/12/8/11/6 (12/8/15/0:50 Desc Main Beth Debtor 1 Documernt Page 24 of 71 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 A/R CONCEPTS \$0.00 Last 4 digits of account number 8308 Nonpriority Creditor's Name 18-3 E DUNDEE RD STE 330 When was the debt incurred? 7/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **BARRINGTON** Illinois 60010 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Collection; Collecting for ORIGINAL Is the claim subject to offset? **~** CREDITOR: 04 MUNICIPALITY PARK **✓** No Other, Specify RIDGE IL Yes 4.2 AMERICAN HONDA FINANCE \$0.00 8287 Last 4 digits of account number Nonpriority Creditor's Name 601 W CAMPUS DR STE C When was the debt incurred? 11/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent 60004 ARLINGTON Illinois Unliquidated **HEIGHTS** State City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify_ 042 Automobile Is the claim subject to offset? **I√**I No Yes 4.3 AVANT INC \$4.093.00 Last 4 digits of account number 5969 Nonpriority Creditor's Name 640 N. LAŚALLE ST. SUITE 545 When was the debt incurred? 3/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent CHICAGO Illinois 60654 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify 036 InstallmentLoan ✓ No

Yes

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/168/16 Entered 05/168/166/168/50:50 Desc Main First Name Document Page 25 of 71

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | After listing any entries on this page, number them beginning v | vith 4.5, followed by 4.6, and so forth. | Total claim |
|-----|---|---|-------------|
| 4.4 | Capital One Nonpriority Creditor's Name Po Box 30281 Number Street | Last 4 digits of account number 4367 When was the debt incurred? 10/1/2008 As of the date you file, the claim is: Check all that apply. Contingent | \$7,969.00 |
| | Salt Lake Cty Utah 84130 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ☐ Yes | Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify CreditCard | |
| 4.5 | CB/VICSCRT Nonpriority Creditor's Name 220 W SCHROCK RD Number Street WESTERVILLE Ohio 43081 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number 6403 When was the debt incurred? 9/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CreditCard | \$319.00 |
| 4.6 | CHASE Nonpriority Creditor's Name PO Box 15298 Number Street Wilmington Delaware 19850 City State Zip Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☑ No ☐ Yes | Last 4 digits of account number | \$19,417.00 |

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/128/116 Entered 05/128/116 /128/50:50 Desc Main Document Page 26 of 71 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 CITI \$3,190.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 6241 When was the debt incurred? 6/1/2012 Street Number As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS South Dakota 57117 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another

| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
|-----|--|--|-----|--|--|--|
| | Is the claim subject to offset? | ✓ Other. Specify <u>CreditCard</u> | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.8 | KOHLS/CAPONE | Last 4 digits of account number | .00 | | | |
| | Nonpriority Creditor's Name PO Box 3004 | When was the debt incurred? 12/1/2010 | | | | |
| | Number Street | when was the dept incurred: 12/1/2010 | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | Milwaukee Wisconsin 53201 | Contingent | | | | |
| | City State Zip Code | Unliquidated | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | Student loans | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Is the claim subject to offset? | ✓ Other. Specify <u>CreditCard</u> | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.9 | KOHLS/CAPONE | \$ 2070 | .00 | | | |
| | Nonpriority Creditor's Name | Last 4 digits of account number9575 | .00 | | | |
| | PO Box 3004 Number Street | When was the debt incurred? 12/1/2010 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | Milwaukee Wisconsin 53201 City State Zip Code | Unliquidated | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | |
| | ✓ Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | | | | | |
| | | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | | | | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | <u>'</u> | Obligations arising out of a separation agreement or divorce that | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | |
| | At least one of the debtors and another Check if this claim relates to a community debt | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | |

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/168/16 Entered 05/168/166/168/50:50 Desc Main First Name Document Page 27 of 71

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning | g with 4.5, followed by 4.6, and so forth. | Total claim |
|---|--|-------------|
| A.10 TARGET/TD Nonpriority Creditor's Name 1000 Nicollet Mall Number Street Minneapolis Minnesota 55403 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number | \$3,101.00 |
| TRANSWORLD SYS INC/55 Nonpriority Creditor's Name 507 Prudential Rd Number Street | Last 4 digits of account number 3940 When was the debt incurred? 12/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL PAYMENT Other. Specify DATA | \$118.00 |
| TRANSWORLD SYS INC/55 Nonpriority Creditor's Name 507 Prudential Rd Number Street | Last 4 digits of account number | \$71.00 |

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/18/16 Entered 05/18/16 A&50:50 Desc Main
First Name Document Page 28 of 71

Add the Amounts for Each Type of Unsecured Claim

| | Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. | | | | | | | | |
|--------------------------|--|---|-----|--------------|--|--|--|--|--|
| | | | | Total claims | | | | | |
| Total claims from Part 1 | 6a. | Domestic support obligations. | 6a. | \$0.00 | | | | | |
| | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 | | | | | |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | | | | | |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | | | | | |
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$0.00 | | | | | |
| | | | | Total claims | | | | | |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 | | | | | |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | | | | | |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | | | | | |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$38,278.00 | | | | | |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$38,278.00 | | | | | |

| | 0 4040040 | 5 4 5" 10 | 5/40/40 | 1.05/4.0/4.0.4.0.50.50 | 5 44 : |
|--------------------------------|--|---------------------------------|------------------------------------|---|---|
| Fill in this info | Case 16-16840 rmation to identify your case: | | 5/18/16 Entered | 1.05/1.8/16 18:50:50 | Desc Main |
| Debtor 1 | Beth First Name | Ann Middle Name | Jacobellis Last Name | | |
| Debtor 2 (Spouse, if filing | ng) First Name | Middle Name | Last Name | | |
| United States Case number | Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Official | Form 106G | | | | Check if this is a amended filing |
| Schedu | ıle G: Executo | ory Contracts | and Unexpire | d Leases | 12/1 |
| | ed, copy the additional page | | | | ng correct information. If more onal pages, write your name and |
| | have any executory c | • | | ng else to report on this form. | |
| ✓ Yes. F | ill in all of the information belo | ow even if the contracts or lea | ases are listed on <i>Schedule</i> | A/B: Property (Official Form 106A | /B). |
| | | | | n state what each contract or leax xamples of executory contracts an | |
| Perso | on or company with whom | you have the contract or le | ease | State what the contract | t or lease is for |
| 2.1 TOYOT Name | TA MOTOR CREDIT | | | Auto Lease, Debtor is Lessee, Auto Lease | |
| 1111 W Number | 22ND ST STE 420 r Street | | | | |

60523 Zip Code

Illinois

OAK BROOK City

| | | Case 16-16840 | | 5/18/16 Entered | <u>05/1</u> 8/16 18:50:50 | Desc Main |
|--------|--|--|-----------------------------------|--------------------------------|--------------------------------|--|
| Fill | in this inform | ation to identify your case | 9: | Ų. | | |
| De | btor 1 | Beth | Ann | Jacobellis | | |
| | | First Name | Middle Name | Last Name | | |
| | btor 2 ouse, if filing | First Name | Middle Name | Last Name | | |
| (-1 | J. | Tilstivanic | Middle Name | Lastivanic | | |
| Un | ited States Ba | ankruptcy Court for the: | Northern | _ District of Illinois (State) | | |
| | se number (nown) | | | (State) | | |
| | | | | | <u>_</u> | Check if this is a |
| \sim | ficial F | - 10611 | | | | amended filing |
| U | iiciai r | orm 106H | | | | |
| Sc | hedul | e H: Your Co | debtors | | | 12/1 |
| | ✓ No ☐ Yes Within the Louisiana, N ✓ No. Ge | last 8 years, have you li levada, New Mexico, Pue o to line 3. | ived in a community proper | and Wisconsin.) | , | <i>ie</i> s include Arizona, California, Idaho, |
| | Yes. D | | ouse, or legal equivalent live | with you at the time? | | |
| | | | tate or territory did you live? _ | Fill in the | name and current address of th | at person. |
| | | Name of your spouse, for | ormer spouse, or legal equival | ent | _ | |
| | | Number Street | | | _ | |
| | | City | State | Zip Code | _ | |
| 3. | as a codeb | tor only if that person is | s a guarantor or cosigner. I | Make sure you have listed th | | the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2. |
| | Column 1: | Your codebtor | | | Column 2: The creditor to | whom you owe the debt |

Check all schedules that apply:

| Fill in this | s information to identify | y your case: | | | 8/16 18 | :50:50 | Desc M | ain | |
|--|--|---|----------------------|----------------|----------------|---------------|--------------------------------|-------|---------------------------------|
| | • | Docum | | ige or or | 7.4 | | | | |
| Debtor 1 | Beth | Ann | Jacobellis | | _ | | | | |
| | First Name | Middle Name | Last Name | 9 | | Check if this | is: | | |
| Debtor 2 | filing) =: | | | | _ | Π Δn amer | nded filing | | |
| Spouse, ii | filing) First Name | Middle Name | Last Name | 9 | | = | Ü | | |
| United State | es Bankruptcy Court for the: | Northern | District of Illinois | | _ | | ment showin s as of the fol | | -petition chapter 1: g date: |
| Case numb | er | | | | - | MM / DE |) / YYYY | _ | |
| | ll Form 106l | | | | | | | | |
| Sched | lule I: Your Inc | ome | | | | | | | 12/1 |
| ages, wi | | e. If more space is neede se number (if known). An | | | heet to this f | orm. On ti | ne top of a | iny a | ıdditional |
| | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | | | |
| | iniormation. | Employment status | ✓ Employed | | | Employ | red | | |
| | If you have more than one | | Not Employ | rod. | | Not Em | | | |
| | job, attach a separate page with | | Not Employ | /eu | | LI NOT LIT | ipioyeu | | |
| | information about additional | Occupation | Account Execut | tive | | | | | |
| | employers. | Employer's name | WGN Continen | ntal Broadcast | ing Company, | | | | |
| | Include part time, seasonal, | Employer's address | 435 N Michigar | n Ave | | | | | |
| | or self-employed work. | | Number Street | | | Number Stre | et | | |
| | Occupation may include | | | | | | | | |
| | student | | | | | | | | |
| , | or homemaker, if it applies. | | Chicago | Illinois | 60611 | | | | |
| | | | City | State | Zip Code | City | S | tate | Zip Code |
| | | How long employed there? | 10 months | | | | | | |
| Estimate are separa If you or yo a separate | ated. Dur non-filing spouse have moes sheet to this form. | Monthly Income date you file this form. If you have than one employer, combine the commissions (before all | ne information for | all employers | | | ow. If you nee | | |
| | | lculate what the monthly wage wo | | | φο,υυυ.υΖ | | | - | |
| | nate and list monthly overt | | | 3. | + \$3,748.18 | | | | |

4. Calculate gross income. Add line 2 + line 3.

\$8,748.20

| Debtor 1 Beth Case 16-16840 AnDoc 1 Filed 05/418/41/6 First Name Middle Name Documentame | | e <u>red</u> 05/18/16/ 32 of 71 | <u> ಜಿ.5</u> 0: <u>50 Desc</u> | <u>Mair</u> | 1 |
|--|-------------|---|-----------------------------------|-------------|-------------------------|
| | 5 | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Copy line 4 here | 4. | \$8,748.20 | | i | |
| 5. List all payroll deductions: | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$2,434.62 | | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | | |
| 5e. Insurance | 5e. | \$719.96 | | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | | |
| 5g. Union dues | 5g. | \$0.00 | | | |
| 5h. Other deductions. Specify: | 5h. + | \$0.00 | | | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$3,154.58 | | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$5,593.62 | | | |
| 8. List all other income regularly received: | | | | | |
| Net income from rental property and from operating a business, profession, or farm | | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | |
| monthly net income. | 8a. | \$0.00 | | | |
| 8b. Interest and dividends | 8b. | \$0.00 | | | |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | | | | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$0.00 | | | |
| 8d. Unemployment compensation | 8d. | \$0.00 | | | |
| 8e. Social Security | 8e. | \$0.00 | | | |
| 8f. Other government assistance that you regularly receive | | | | | |
| Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | 8f. | \$0.00 | | | |
| 8g. Pension or retirement income | 8g. | \$0.00 | | | |
| 8h. Other monthly income. Specify: | 8h. + | \$0.00 | | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$0.00 | |] | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse | 10. | \$5,593.62 | • |] = [| \$5,593.62 |
| 11. State all other regular contributions to the expenses that you list in Scheol Include contributions from an unmarried partner, members of your household, your relatives | | nts, your roommates, an | d other friends or | | |
| relatives. Do not include any amounts already included in lines 2-10 or amounts that are not | available t | to pay expenses listed in | Schedule J. | | |
| Specify: | | | | 11. + | \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The | result is t | ne combined monthly inc | come | 12. | |
| Write that amount on the Summary of Schedules and Statistical Summary of Certa | | | | 12. | \$5,593.62 |
| | | | | | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after you file this for | rm? | | | | |
| No. | | | | | |
| Yes. Explain: | | | | | |
| | | | | | |

| | Case 16-1684 | 10 Doc 1 Filed 05 | 5/18/16 Entered 05 | <i>/</i> 18/16 18:50:50 | Desc Main | 1 |
|---------------------------------|---|---|--|----------------------------|---|--------------|
| Fill in this informa | ation to identify your cas | | <u> </u> | | | |
| Debtor 1 | Beth | Ann | Jacobellis | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Nome | Loot Nome | Check if this is: | | |
| (Opouse, ir ming) | riist name | Middle Name | Last Name | An amended fili | ng | |
| United States Ba | nkruptcy Court for the: | Northern | District of Illinois (State) | | howing post-petition the following date: | ı chapter 13 |
| Case number (If known) | - | | | MM / DD / YYY | | |
| Official F | orm 106J | | | | • | |
| | e J: Your Ex | (penses | | | | 12/1 |
| | | • | filing together both are equally | v voonomoible for ourselvi | | - |
| nformation. If m | | | filing together, both are equally orm. On the top of any addition | | | er |
| | ribe Your Househ | old | | | | |
| 1. Is this a joint | | olu | | | | |
| ✓ No. Go t | | | | | | |
| Yes. Doe | es Debtor 2 live in a s | eparate household? | | | | |
| | No | | | | | |
| | | 0,000 | | | | |
| | | | es for Separate Household of Del | btor 2. | | |
| 2. Do you have | = | No | | | | |
| Do not list Del Debtor 2. | | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | o Dependent's age | Does depend with you? | ent live |
| | | | Child | 13 years | No. | |
| | | | | | ✓ Yes. | |
| 3. Do your expe | | No | | | | |
| expenses of than | poopio otiio. | | | | | |
| yourself and dependents? | your 🗀 | ⁄es | | | | |
| | | Monthly Expenses | | | | |
| | | | ou are using this form as a sup | onloment in a Chanter 13 | case to report | |
| • | a date after the bank | | lemental Schedule J, check th | • | • | |
| | | cash government assistance in | | | Voi | ur expenses |
| | | t on Schedule I: Your Income | | | 100 | |
| | r home ownership exp the ground or lot. 4. | penses for your residence. Incl | ude first mortgage payments and | 1 | 4. | \$2,472.00 |
| | ded in line 4: | | | | | |
| 4a. Real est | ate taxes | | | | 4a | \$0.00 |
| 4b. Property | , homeowner's, or rente | er's insurance | | | 4b. | \$0.00 |
| 4c. Home m | aintenance, repair, and u | upkeep expenses | | | 4c. | \$0.00 |

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/128/116 Entered 05/118/116 (11/8/50:50 Desc Main

Document Page 34 of 71 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$250.00 6a. 6b. Water, sewer, garbage collection \$20.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$375.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$388.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$40.00 9. 10. Personal care products and services \$50.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$200.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$155.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: Auto Lease \$693.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c

\$0.00

\$0.00

20d

20e

20d. Maintenance, repair, and upkeep expenses 20d.

20e. Homeowner's association or condominium dues

| Debtor 1 | Beth Case 16-16840 ADOC 1 Filed 05/12/24/16 Entered 05/12/24/16/16/16/25/50:50 | Desc Main | | | | | |
|-------------------|--|-----------|------------|--|--|--|--|
| | First Name Middle Name Documet Name Page 35 of 71 | | | | | | |
| 21.Other. | Specify: | 21 | \$0.00 | | | | |
| | | | | | | | |
| 22. Calcu | ate your monthly expenses. | _ | \$4,643.00 | | | | |
| 22a. A | dd lines 4 through 21. | _ | \$0.00 | | | | |
| 22b. C | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | | | | | |
| 22c. A | dd line 22a and 22b. The result is your monthly expenses. | 22. | | | | | |
| 23. Calcu | ate your monthly net income. | | | | | | |
| 23a. C | opy line 12 (your combined monthly income) from Schedule I. | 23a | \$5,593.62 | | | | |
| 23b. C | ppy your monthly expenses from line 22 above. | 23b | \$4,643.00 | | | | |
| | 23c. Subtract your monthly expenses from your monthly income. | | | | | | |
| _ | he result is your monthly net income. | 23c | | | | | |
| 24. Do y o | u expect an increase or decrease in your expenses within the year after you file this form? | | | | | | |
| • | cample, do you expect to finish paying for your car loan within the year or do you expect your | | | | | | |
| | age payment to increase or decrease because of a modification to the terms of your mortgage? | | | | | | |
| ✓ N | 0 | | | | | | |
| | es s | | | | | | |
| ш. | | | | | | | |
| | Explain here: | | | | | | |
| | | | | | | | |
| | | | | | | | |
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| | | | | | | | |

page 3

| | Case 16-16840 | Doc 1 Filod 0 | 5/19/16 Ento | red 05/18/16 18:50:50 | Dosc Main |
|---------------------------------|--|------------------------------|------------------------------------|--|---------------------------------------|
| Fill in this infor | rmation to identify your case: | | 3/18/10 THE | 1211037.0/10 10.30.30 | Desc Main |
| Debtor 1 | Beth | Ann | Jacobellis | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | ng) First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | - | | | | |
| Official | Form 106Dec | 2 | | | Check if this is a amended filing |
| Declara | ition About an | Individual De | btor's Sche | edules | 12/1 |
| If two married | people are filing together | , both are equally responsil | ble for supplying cor | rect information. | |
| Part 1: Sig | n Below | one who is NOT an attorney | | | irs, or both. 18 U.S.C. §§ 152, 1341, |
| Yes. | Name of person | | Attach Bankrup Signature (Offic | otcy Petition Preparer's Notice, Declar cial Form 119). | ration, and |
| | enalty of perjury, I declare vare true and correct. | that I have read the summa | ry and schedules file | d with this declaration and | |
| 🗶 /s/ Beth | Jacobellis | | x | | |
| Signature | of Debtor 1 | | Sigr | nature of Debtor 2 | |
| Date 5/18 | | | Date | | |
| MN | M/DD/YYYY | | | MM/DD/YYYY | |

| Fill in thi | Case 16- | | oc 1 Filed 05/1 | 8/16 Entered 05 | 3/18/16 18:50:50 | Desc Main |
|----------------------|-----------------------------|---------------------|-------------------------------|----------------------------|----------------------------|--|
| Debtor 1 | | our oddo. | Ann | Jacobellis | | |
| Debtor 2 | First Name | | Middle Name | Last Name | | |
| | e, if filing) First Name | | Middle Name | Last Name | | |
| United S | States Bankruptcy Court t | for the: Northe | ern Dis | trict of Illinois (State) | | |
| Case nu (If known | | | | (State) | | |
| Offic | cial Form 10 | 7 | | | | Check if this is an amended filing |
| State | ement of Fin | ancial A | ffairs for Indi | viduals Filing | for Bankrup | t cy 12/1 |
| e as co | mplete and accurate a | s possible. If two | o married people are filin | ng together, both are equa | lly responsible for supply | ying correct information. If more er (if known). Answer every question |
| - | - - | | al Status and Where | | ar name and sace name | y (ii iaioini), yiioiloi otoly quocioi |
| | | | otatus and where | Tod Lived Before | | |
| 1. V | What is your current m | aritai Status? | | | | |
| <u>r</u> | ✓ Married ✓ Not married | | | | | |
| 2. D | Ouring the last 3 years, | have you lived a | nywhere other than wher | e you live now? | | |
| | No Yes. List all of the pla | ces you lived in th | e last 3 years. Do not includ | le where you live now. | | |
| | Debtor 1: | | Dates Debto there | r 1 lived Debtor 2: | | Dates Debtor 2 lived there |
| | | | | Same as | Debtor 1 | Same as Debtor 1 |
| | Number Street | | From | Number Stre | | From |
| | Number Street | | <u>-</u> | Number Sue | , C (| _ |
| | | | To | | - | To |
| | | | | | | |
| | City S | State Zip | Code | City | State Zip C Debtor 1 | Code |
| | City 5 | State Zip | Code | City Same as | | Code Same as Debtor 1 |
| | City S | State Zip | Code From | | Debtor 1 | Code Same as Debtor 1 From |
| | | State Zip | Code | Same as | Debtor 1 | Code Same as Debtor 1 |

Debtor 1 Beth Case 16-16840 A DOC 1
First Name Middle Name

<u>Filed 05/18/16 Entered 05/18/16 /18:50:50 Desc Main</u>
Document Page 38 of 71 Part 2: Explain the Sources of Your Income

| No Yes. Fill in the details. | ave income that you receive tog | , including part-time ether, list it only once under I | Debtor 1. | |
|---|---|--|--|--|
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$25060.21 | Wages, commissions, bonuses, tips Operating a business | |
| For last calendar year: (January 1 to December 31, | Wages, commissions, bonuses, tips Operating a business | \$35671.94 | Wages, commissions, bonuses, tips Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2014) YYYY | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$81976.00 | Wages, commissions, bonuses, tips Operating a business | |
| ict anch course and the grass income from an | | | | |
| Ist each source and the gross income from each No Yes. Fill in the details. | ch source separately. Do not inc | lude income that you listed ir | n line 4. | |
| ✓ No | ch source separately. Do not inc | lude income that you listed ir | n line 4. Debtor 2 | |
| ✓ No | | Gross income from each source (before deductions and exclusions) | | Gross income from each source (before deductions and exclusions) |
| ✓ No | Debtor 1 Sources of income | Gross income from each source (before deductions and | Debtor 2 Sources of income | each source (before deductions and |
| No Yes. Fill in the details. From January 1 of current year until | Debtor 1 Sources of income | Gross income from each source (before deductions and | Debtor 2 Sources of income | each source (before deductions and |
| No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, | Debtor 1 Sources of income | Gross income from each source (before deductions and | Debtor 2 Sources of income | each source (before deductions and |

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/18/106 Entered 05/18/106 (1/18/50:50 Desc Main

First Name Document Page 39 of 71

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other Mortgage Creditor's Name Car

Number

City

Street

State

Zip Code

Credit card Loan repayment Suppliers or vendors

Other

ADOC 1 Filed 05/128/116 Entered 05/128/116 118/50:50 Desc Main Debtor 1 Document Page 40 of 71 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1

Beth Case 16-16840 ADOC 1 Filed 05/168/16 Entered 05/168/16 (168/50): 50 Desc Main

First Name Docume in Page 41 of 71

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

| No Yes | s. Fill in the details. | | | | | |
|-------------|---|--|--|-------|----------|-----------------------|
| | | Nature of the case | Court or agen | су | | Status of the case |
| C | Case title | | | | | Pending |
| - | Case number | | Court Name | | | On appeal |
| _ | pase number | | Number Street | | | Concluded |
| | | | City | State | Zip Code | _ |
| C | Case title | | One of No. 11 | | | Pending |
| - | Case number | | Court Name | | | On appeal Concluded |
| _ | | | Number Street | | | Concluded |
| _ | | | City | State | Zip Code | _ |
| ш. | es. Fill in the information below. | Describe the pr | operty | | Date | Value of the property |
| | Creditor's Name | Describe the pr | | | Date | Value of the property |
| | | | | | Date | |
| | Creditor's Name | Explain what ha | appened s repossessed. | | Date | |
| | Creditor's Name | Explain what ha | s repossessed. | | Date | |
| | Creditor's Name | Explain what ha | s repossessed. | vied. | Date | |
| | Creditor's Name Number Street | Explain what ha | s repossessed. s foreclosed. s garnished. s attached, seized, or le | vied. | Date | |
| - - | Creditor's Name Number Street | Explain what ha Property was Property was Property was Property was | s repossessed. s foreclosed. s garnished. s attached, seized, or le | vied. | | Property Value of the |
| - - | Creditor's Name Number Street City State Zip Co | Explain what ha Property was Property was Property was Property was | es repossessed. s foreclosed. s garnished. s attached, seized, or le | vied. | | Property Value of the |
| - - - | Creditor's Name Number Street City State Zip Co | Explain what hat hat Property was Property was Property was Describe the pr | reppened s repossessed. s foreclosed. s garnished. s attached, seized, or le operty | vied. | | Property Value of the |
| - - - | Creditor's Name Number Street City State Zip Co | Explain what hat hat Property was Property was Property was Describe the pr | repossessed. s repossessed. s foreclosed. s garnished. s attached, seized, or le operty repossessed. | vied. | | Property Value of the |
| - - - | Creditor's Name Number Street City State Zip Co | Explain what has Property was Property was Property was Describe the pr Explain what has Property was | s repossessed. s foreclosed. s garnished. s attached, seized, or le operty appened s repossessed. s foreclosed. | | | Property Value of the |

| Deb | tor 1 | | <u>d 05/1æ/1⊌6 Entered </u> 05/1æ/16 /1æ⊹50: cumeint™ Page 42 of 71 | 50 Desc | Main |
|------|----------|---|--|--------------------------|-------------------------|
| 11. | | nin 90 days before you filed for bankruptcy, did any obunts or refuse to make a payment because you owe | creditor, including a bank or financial institution, set of d a debt? | ff any amounts fr | om your |
| | Ħ | Yes. Fill in the details. | | | |
| | _ | | Describe the action the creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | |
| | | Number Street | | | |
| | | | Last 4 digits of account number: XXXX- | | |
| | | City State Zip Code | | | |
| 12. | | nin 1 year before you filed for bankruptcy, was any of iver, a custodian, or another official? | your property in the possession of an assignee for the | e benefit of credi | tors, a court-appointed |
| | | No | | | |
| | | Yes | | | |
| Part | 5: | List Certain Gifts and Contributions | | | |
| 13. | Wit | thin 2 years before you filed for bankruptcy, did you | give any gifts with a total value of more than \$600 per | person? | |
| | ✓ | No | | | |
| | | Yes. Fill in the details for each gift. | | | |
| | | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the Gift | | | |
| | | | | | |
| | | Number Street | | | |
| | | City State Zip Code | | | |
| | | Person's relationship to you | | | |
| | | Person to Whom You Gave the Gift | | | |
| | | Number Street | | | |
| | | City State Zip Code | | | |
| | | Person's relationship to you | | | |
| | | | | | |

| | | FIRST Name | IVI | ladie Name De | ocument Page 43 of 71 | | |
|-------------|----------|---|------------------|---------------------|--|---|------------------------|
| 14. | With | nin 2 years before yo | ou filed for ba | | give any gifts or contributions with a total value of mor | e than \$600 to an | y charity? |
| | ✓ | No Yes. Fill in the details | for each gift o | r contribution. | | | |
| | _ | Gifts with a total va | _ | | Describe the gifts | Dates you gave the gifts | Value |
| | | Charity's Name | | | - | | |
| | | | | | | | |
| | | Number Street | | | _ | | |
| _ | | City | State | Zip Code | | | |
| Part 15. | | List Certain Loss | | cruntey or since v | ou filed for bankruptcy, did you lose anything because | of theft fire other | r disaster or |
| 10. | | bling? | Thea for bain | truptey of since y | ou filed for ballikuptey, and you lose anything because | or there, me, othe | i disaster, or |
| | | No Yes. Fill in the details. | | | | | |
| | | Describe the proper how the loss occurrence | | nd | Describe any insurance coverage for the loss | Date of your loss | Value of property lost |
| | | | | | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i> | | |
| | | | | | | | |
| Part | 7: I | List Certain Payn | ments or Tr | ansfers | | | |
| 16. | seek | ing bankruptcy or p | reparing a ba | nkruptcy petition | | | ne you consulted about |
| | _ | de any attorneys, bank No | kruptcy petition | preparers, or credi | it counseling agencies for services required in your bankrupto | су. | |
| | | Yes. Fill in the details. | | | | | |
| | | | | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm | : | | Attorney's Fee - 350.00 | 5/16/2016 | \$350.00 |
| | | Person Who Was Pai 20 South Clark Street | | | | | |
| | | Number Street | | | | | |
| | | Chicago | Illinois | 60606 | | | |
| | | City | State | Zip Code | | | |
| | | Email or website add | | | • | | |
| | | Person Who Made the | e Payment, if N | lot You | | <u> </u> | |
| | | Person Who Was Pai | id | | - | | |
| | | Number Street | | | | | |
| | | City | State | Zip Code | - | | |
| | | Email or website add | ress | | | | |
| | | Person Who Made the | e Payment, if N | lot You | - | | |
| | | | • ' | | | 1 | |

Debtor 1 Beth Case 16-16840 ADOC 1 Filed 05/18/16 Entered 05/18/16 A& 50:50 Desc Main

| | | Description and value of any prop | erty transferred | Date payment or transfer | Amour | nt of paymer |
|----------------|---|---|----------------------|---------------------------------------|-----------|---------------|
| | | | | was made | | |
| İ | Person Who Was Paid | _ | | | | |
| | Number Street | | | | | |
| | City State Zip Code | _ | | | | |
| nclud ansfe | ary course of your business or financial affairs? the both outright transfers and transfers made as sectors that you have already listed on this statement. No Yes. Fill in the details. | | erest or mortgage on | your property). Do | not inclu | ude gifts and |
| | | Description and value of any property transferred | | property or paym ebts paid in exch | | Date trans |
| i | Person Who Received Transfer | _ | | | | |
| | Number Street | _ | | | | |
| | City State Zip Code Person's relationship to you | _ | | | | |
| i | Person Who Received Transfer | _ | | | | |
| | Number Street | _ | | | | |
| | City State Zip Code Person's relationship to you | | | | | |
| Thes | in 10 years before you filed for bankruptcy, did y ee are often called asset-protection devices.) | ou transfer any property to a self-settle | d trust or similar d | evice of which yo | u are a k | peneficiary? |
| _ | res. Fill in the details. | | | | | |

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 Desc Main

 Document
 Page 45 of 71
 Debtor 1 Beth Case 16-16840 A DOC 1 First Name Middle Name

| Part | 8: | List Certain Fir | nancial Acc | counts, Instru | uments, | Safe Deposit B | oxes, and St | orage Units | | |
|------|--------------|--|-----------------|---------------------|--------------|--|-----------------|-------------------------|---|-------------------------------|
| 20. | or tr | ansferred? | ıs, money marl | ket, or other finan | cial account | | | n your name, or for you | | |
| | | No | | | | | | | | |
| | Ħ | Yes. Fill in the deta | ils. | | | | | | | |
| | _ | | | | Last | 4 digits of accoun | t Type of | account or | Date account | Last balance |
| | | | | | numl | _ | instrun | | was closed, sold, moved, or transferred | before closing or transfer |
| | | Person Who Was F | Paid | | XXXX | (- | | ecking rings | | |
| | | Number Street | | | | | | ney market | | |
| | | | | | | | Bro | kerage er | | |
| | | City | State | Zip Code | | | _ | | | |
| | | City | Siale | Zip Code | | | | | | |
| | | Person Who Was F | Paid | | XXXX | (- | | ecking | | |
| | | | | | | | | vings | | |
| | | Number Street | | | | | | ney market | | |
| | | - | | | | | ☐ Oth | kerage | | |
| | | | | | | | | е | | |
| | | City | State | Zip Code | | | | | | |
| 21. | | vou now have, or dables? No Yes. Fill in the deta | | vithin 1 year bef | | ed for bankruptcy, e had access to it? | | t box or other deposito | | Do you still have it? |
| | | | | | | | | | | _ |
| | | Name of Financial | Institution | | Name | | | | | ∐ No ∏ Yes |
| | | Number Street | | | Number | Street | | | | 103 |
| | | - | | | City | State | Zip Code | | | |
| | | City | State | Zip Code | | | | | | |
| | | | | | | | | | • | |
| 22. | Hav | e you stored prope | erty in a stora | ge unit or place | otner tnar | i your nome withir | 1 year before y | ou filed for bankruptcy | ? | |
| | \checkmark | No | | | | | | | | |
| | | Yes. Fill in the deta | ils. | | | | | | | |
| | | | | | Who else | had access to it? | | Describe the content | s | Do you still have it? |
| | | Name - Comme | Facilit : | | None | | | | | □ No |
| | | Name of Storage I | racility | | Name | | | | | Yes |
| | | Number Street | | | Number | Street | | | | |
| | | | | | City | State | Zip Code | | | |
| | | | | | Oity | Jiaio | 21p 0000 | | | |

City

State

Zip Code

| | tor 1 | First Name Middle Name | Filed 05/ Docum | ënti™ Paq | ntered 05/1 ge 46 of 71 | -8416 /1⊾8;50: <u>50 Desc Mair</u> | 1 |
|------|----------|--|--------------------|---------------------|----------------------------|---|-----------------|
| Part | 9: | Identify Property You Hold or Contro | I for Some | one Else | | | |
| 23. | | you hold or control any property that someone No Yes. Fill in the details. | e else owns? | Include any pro | pperty you borro | wed from, are storing for, or hold in tru | st for someone. |
| | | | Where is t | he property? | | Describe the contents | Value |
| | | Owner's Name | Number St | reet | | - | |
| | | Number Street | - | | | - | |
| | | | City | State | Zip Code | - | |
| | | City State Zip Code | _ | | | | |
| Part | 10: | Give Details About Environmental In | formation | | | | |
| For | the p | urpose of Part 10, the following definitions apply: | | | | | |
| | ha | nvironmental law means any federal, state, or local azardous or toxic substances, wastes, or material in cluding statutes or regulations controlling the clear | nto the air, land | d, soil, surface wa | ater, groundwater, | | |
| | | ite means any location, facility, or property as define used to own, operate, or utilize it, including dispos | | nvironmental law, | whether you now | own, operate, or utilize it | |
| | | azardous material means anything an environment xic substance, hazardous material, pollutant, conta | | | aste, hazardous s | substance, | |
| Rep | ort al | I notices, releases, and proceedings that you know | about, regardl | less of when they | occurred. | | |
| 24 | Hae | any governmental unit notified you that you r | nav he liahle | or notentially li | able under or in | violation of an environmental law? | |
| | <u>√</u> | No | nay be nable | or poterniany in | able under or in | violation of an environmental law: | |
| | Ц | Yes. Fill in the details. | Governme | ntal unit | | Environmental law, if you know it | Date of notice |
| | | | | | | | |
| | | Name of site | Governmen | tal unit | | | |
| | | Number Street | Number St | reet | | - | |
| | | | City | State | Zip Code | - | |
| | | City State Zip Code | _ | | | | |
| 25. | Hav | e you notified any governmental unit of any re | elease of haza | ardous material | ? | | |
| | | No | | | | | |
| | ш | Yes. Fill in the details. | Governme | ntal unit | | Environmental law, if you know it | Date of notice |
| | | Name of site | Covernmen | tol unit | | - | |
| | | | Governmen | | | _ | |
| | | Number Street | Number St | reet | | | |
| | | | City | State | Zip Code | - | |
| | | City State Zip Code | _ | | | | |
| | | | | | | | |

| Debt | or 1 | Beth Case 16 First Name | -16840 | A DOC 1 Middle Name | Filed 05/128/116 Document | Entered 05/1/6 Page 47 of 71 | 14166 (148450: <u>50</u> | Desc Main | |
|-------|----------|---------------------------------|-------------------|------------------------|-------------------------------|---------------------------------|--------------------------|---|--|
| 26. | Hav | e you been a party i | n any judici | al or administra | ative proceeding under | any environmental law | ? Include settlements | and orders. | |
| | V | No | | | | | | | |
| | Ħ | Yes. Fill in the details | S. | | | | | | |
| | | | | | Court or agency | | Nature of the case | Status of the case | |
| | | Case title | | | | | | Pending | |
| | | | | | Court Name | | | On appeal | |
| | | Case number | | | Number Street | | | Concluded | |
| | | | | | City Stat | te Zip Code | | | |
| Part | 11. | Give Details Ab | out Your | Business or | Connections to A | nv Business | | | |
| · art | ••• | GIVE Detaile Ab | out rour | Buomicoo or | Comiconono to A | ny Buomess | | | |
| 27. | With | nin 4 years before yo | ou filed for l | oankruptcy, did | you own a business of | r have any of the follow | ing connections to an | y business? | |
| | | ✓ A sole proprietor | r or self-emp | loyed in a trade, | profession, or other activ | rity, either full-time or part | -time | | |
| | | A member of a l | imited liability | company (LLC |) or limited liability partne | rship (LLP) | | | |
| | | A partner in a pa | artnership | | | | | | |
| | | An officer, direct | _ | _ | | | | | |
| | | An owner of at le | east 5% of th | e voting or equit | y securities of a corporati | on | | | |
| | | No. None of the abov | e applies. Go | to Part 12. | | | | | |
| | ✓ | Yes. Check all that ap | ply above ar | nd fill in the detail | s below for each busines | S. | | | |
| | | | | | Describe the na | ature of the business | | Employer Identification number Do not include Social Security number or ITIN. | |
| | | Jaco Bella Jewelry | | | Jewelry Trade | | EIN:47-38994 | 139 | |
| | | Business Name | | | | | | | |
| | | 200 E Lahon St Number Street | | | | | | | |
| | | | Illingia | 60060 | Name of accou | ntant or bookkeeper | Dates busine | ess existed | |
| | | Park Ridge City | Illinois State | 60068 Zip Code | | | | | |
| | | , | | · | | | From <u>1/1/20</u> | 003 To <u>12/31/2015</u> | |
| | | | | | Describe the na | ature of the business | | lentification number Do not ial Security number or ITIN. | |
| | | Business Name | | | | | EIN: | | |
| | | Dusiness Name | | | | | | | |
| | | Number Street | | | Name of accou | ntant or bookkeeper | Dates busine | ess existed | |
| | | City | State | Zip Code | | | From | To | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | Describe the na | ature of the business | | lentification number Do not ial Security number or ITIN. | |
| | | Business Name | | | | | EIN: | | |
| | | Number Street | | | Name of accou | ntant or bookkeeper | Dates busine | ess existed | |
| | | City | State | Zip Code | | | From | То | |
| | | | | | | | | | |
| | | | | | | | | | |

| Debto | | ase 16- | <u> 16840</u> | ADOC 1 | Filed 05/128/116 | | <u>ered</u> | Desc Main |
|---------|--------------------------------|---------------------------|---------------|------------------------------------|---------------------------|------------|---|-----------------------------------|
| | First Name | | | Middle Name | Documetnit ^{me} | Page | 48 of 71 | |
| | Within 2 year creditors, or | • | | oankruptcy, die | d you give a financial st | atement | to anyone about your business? In | clude all financial institutions, |
|] | ✓ No Yes. Fill ir | n the details b | elow. | | | | | |
| · | | | | | Date issued | | | |
| | Name | | | | MM/DD/YYYY | | | |
| | Number | Street | | | | | | |
| | City | | State | Zip Cod | <u> </u> | | | |
| Part 1 | 2: Sign B | Below | | | | | | |
| ar | nd correct. I | understand to | hat makin | g a false state p to \$250,000, | ement, concealing prop | erty, or o | s, and I declare under penalty of perbtaining money or property by frauders, or both. 18 U.S.C. §§ 152, 1341, | d in connection with a |
| | | Signature | of Debtor | 1 | | | Signature of Debtor 2 | |
| | | Date 5/1 | 8/2016 | | | | Date | |
| Di V | id you attach No Yes | n additional | pages to Y | our Statemen | t of Financial Affairs fo | r Individu | ıals Filing for Bankruptcy (Official I | Form 107)? |
| D | _ | r agree to pa | y someon | e who is not a | n attorney to help you f | ill out ba | nkruptcy forms? | |
| J | 7 No | | | | | | | |
| Ē | = | e of person | | | | | Attach the Bankruptcy Petition Declaration, and Signature (O | • |
| | | | | | | | | |

B 203 (12/94)

Case 16-16840 Doc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main Document Page 49 of 71

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Beth Ann Jacobellis | Case No. | |
|-------|--|-------------------------------------|--------------------------------|
| • | Debtor | | (If known) |
| | | Chapter | Chapter 13 |
| | DISCLOSURE OF COMPENSATION | N OF ATTORNEY FO | R DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce compensation paid to me within one year before the filing of the rendered or to be rendered on behalf of the debtor(s) in contempts. | petition in bankruptcy, or agreed t | to be paid to me, for services |
| | For legal services, I have agreed to accept | | \$4,000.00 |
| | Prior to the filing of this statement I have received | | \$350.00 |
| | Balance Due | | \$3,650.00 |
| 2. | The source of the compensation paid to me was: | | |
| | Debtor Other (specify) | | |
| 3. | The source of the compensation paid to me is: | | |
| | Debtor Other (specify) | | |
| 4. | I have not agreed to share the above-disclosed compensati members and associates of my law firm. | on with any other person unless th | ey are |
| | I have agreed to share the above-disclosed compensation we members or associates of my law firm. A copy of the agree the people sharing in the compensation, is attached. | | |
| 5. | In return for the above-disclosed fee, I have agreed to render le a. Analysis of the debtor's financial situation, and rendering bankruptcy; | • | |
| | b. Preparation and filing of any petition, schedules, stateme | ents of affairs and plan which may | be required; |
| | c. Representation of the debtor at the meeting of creditors a | and confirmation hearing, and any | adjourned hearings thereof; |

d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

| | CERTIFICATION |
|---|---|
| I certify that the foregoing is a complete statement the debtor(s) in this bankruptcy proceedings. | t of any agreement or arrangement for payment to me for representation of |
| 5/18/2016 | /s/ Michael Spangler 6310219 |

Signature of Attorney

Semrad Law Firm

Name of law firm

Case 16-16840 Doc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Date

B 203 (12/94)

In re

Case 16-16840 Doc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main Document Page 51 of 71

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| е | Beth Ann Jacobellis | Case No. | |
|----|--|--|--|
| | Debtor | | (If known) |
| | | Chapter | Chapter 13 |
| | DISCLOSURE OF CO | MPENSATION OF ATTORNEY | FOR DEBTOR |
| 1. | compensation paid to me within one year | Bankr. P. 2016(b), I certify that I am the attorney for before the filing of the petition in bankruptcy, or age debtor(s) in contemplation of or in connection w | rreed to be paid to me, for services |
| | For legal services, I have agreed to accept | ot | \$4,000.00 |
| | Prior to the filing of this statement I have | received | \$350.00 |
| | Balance Due | | \$3,650.00 |
| 2. | The source of the compensation paid to m | e was: | |
| | Debtor | Other (specify) | |
| 3. | The source of the compensation paid to m | e is: | |
| | Debtor | Other (specify) | |
| 4. | I have not agreed to share the above-members and associates of my law fi | disclosed compensation with any other person unl | ess they are |
| | I have agreed to share the above-discles members or associates of my law firm the people sharing in the compensation | osed compensation with a other person or persons A copy of the agreement, together with a list of n, is attached. | s who are not the names of |
| 5. | In return for the above-disclosed fee, I have a. Analysis of the debtor's financial sit bankruptcy; | re agreed to render legal service for all aspects of uation, and rendering advice to the debtor in deter | the bankruptcy case, including: mining whether to file a petition in |
| | b. Preparation and filing of any petition | n, schedules, statements of affairs and plan which | may be required; |
| | c. Representation of the debtor at the | meeting of creditors and confirmation hearing, and | any adjourned hearings thereof; |
| | d. Representation of the debtor in adv | ersary proceedings and other contested bankrupto | cy matters; |

R

Case 16-16840 Doc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main Document Page 52 of 71

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

| | CERTIFICATION |
|--|---|
| I certify that the foregoing is a complete the debtor(s) in this bankruptcy proceedings | e statement of any agreement or arrangement for payment to me for representation of |
| 5/17/2016 | /s/ Michael Spangler 6310219 |
| Date | Signature of Attorney |
| - | Semrad Law Firm |
| | Name of law firm |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

Case 16-16840 Doc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main Document Page 55 of 71

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

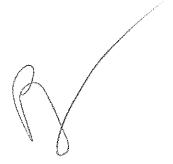
Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 350.00 toward the flat fee, leaving a balance due of \$ 3650.00 ; and \$ 79.26 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Debtor(s)

Date:

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

Case 16-16840 Doc 1 Filed 05/18/16 Document

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

Entered 05/18/16 18:50:50 Desc Main Page 60 of 71

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$310 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$235 | filing fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-16840 Doc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main UNITED STATES BANKBURG OF POURT Northern District of Illinois

| In re: | Jacobellis, Beth Ann | Case No. | | |
|--------|--|--|--------------------------|--|
| | Debtor(s) | 0000 110. | | |
| | | Chapter. Chapter | 13 | |
| | VERIFICATIO | N OF CREDITOR MATRIX | | |
| | The above named Debtors hereby verify that the a | ttached list of creditors is true and correct to the | best of their knowledge. | |
| | | | | |
| Date: | 5/18/2016 | /s/ Jacobellis, Beth Ann | | |
| | | Jacobellis, Beth Ann | | |

Signature of Debtor

Case 16-16840 Doc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main Document Page 64 of 71

CENTRAL MORTGAGE CO 1501 S MAIN ST LITTLE ROCK , AR 72202 USA

CHASE PO Box 15298 Wilmington , DE 19850 USA

Capital One Po Box 30281 Salt Lake Cty , UT 84130 USA

AVANT INC 640 N. LASALLE ST. SUITE 545 CHICAGO , IL 60654 USA

CITI PO BOX 6241 SIOUX FALLS , SD 57117 USA

TARGET/TD 1000 Nicollet Mall Minneapolis , MN 55403 USA

AMERICAN HONDA FINANCE 601 W CAMPUS DR STE C7 ARLINGTON HEIGHTS , IL 60004 USA

CB/VICSCRT 220 W SCHROCK RD WESTERVILLE , OH 43081 USA

A/R CONCEPTS 18-3 E DUNDEE RD STE 330 BARRINGTON , IL 60010 USA

KOHLS/CAPONE PO Box 3004 Milwaukee , WI 53201 LISA

TRANSWORLD SYS INC/55 507 Prudential Rd Horsham , PA 19044 USA

KOHLS/CAPONE PO Box 3004 Milwaukee , WI 53201 USA Case 16-16840 Doc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main TRANSWORLD SYS INC/55 Document Page 65 of 71

Filed 05/18/16 18:50:50 Desc Main Page 65 of 71

| Debtor 1 Beth Case 16- | | 05/ <u>18/16</u> Entered 0 | 5/18/16, 18:50:50 | Desc Main |
|--|--|--|--|---|
| | uestions for Reporting Purp | • | 71 | |
| 16. What kind of debts do you have? | 16a. Are your debts prime as "incurred by an industrial No. Go to line 16b Yes. Go to line 17 16b. Are your debts prime obtain money for a businvestment. No. Go to line 16c Yes. Go to line 17 | arily consumer debts? Co dividual primarily for a perso o. '.' arily business debts? Bus usiness or investment or thro | onal, family, or househo siness debts are debts to ough the operation of t | old purpose." that you incurred to he business or |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid tha funds will be available for distribution to unsecured creditors? | paid that funds will be an No. t Yes. | apter 7. Go to line 18. r 7. Do you estimate that after any e vailable to distribute to unsecured o | exempt property is excluded a creditors? | and administrative expenses are |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 □ 50-99 □ 100-199 □ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 5 | 25,001-50,000 60,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ☐ \$0-\$50,000 ☐ \$50,001-\$100,000 ☑ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$ | 50 million | 500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion fore than \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | ☐ \$0-\$50,000 ☐ \$50,001-\$100,000 ☑ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$ | 50 million S 100 million S | 500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion fore than \$50 billion |
| For you | or 13 of title 11, United State proceed under Chapter 7. If no attorney represents me fill out this document, I have I request relief in accordance I understand making a false connection with a bankruptc or both. 18 U.S.C. §§ 152.4 ** /s/ Beth Jacobellis Signature of Debtor 1 Executed on 5/17/2016 | er Chapter 7, I am aware that es Code. I understand the research and I did not pay or agree to obtained and read the notice with the chapter of title 11 statement, concealing propey case can result in fines up 341, 1519, and 3571. | at I may proceed, if eligelief available under earto pay someone who is ce required by 11 U.S.4, United States Code, serty, or obtaining mone to \$250,000, or imprise Signature of Debtor 2 | gible, under Chapter 7, 11,12, ach chapter, and I choose to s not an attorney to help me C. § 342(b). specified in this petition. |

Case 16-16840 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main Fill in this information to identify your case: Debtor 1 Beth Jacobellis First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Pager Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? ✓ No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct, /s/ Beth Jacobellis « Signature of Debtor 1 Signature of Debtor 2 Date 5/17/2016 MM/DD/YYYY MM/DD/YYYY

| Debto | or 1 | Beth Cas First Name | e 16-16840 | AnDOC 1 Middle Name | Filed 05/18/16 Documentone | Entered 05/18/16 18:50:50 Page 68 of 71 | Desc Main |
|--|--------------|------------------------------------|----------------------------------|------------------------------------|--|---|-----------------------------------|
| 28. | With cred | iin 2 years bel itors, or other | fore you filed for l parties. | bankruptcy, die | d you give a financial st | atement to anyone about your business? Inc | clude all financial institutions, |
| Z-FENERAL PROPERTY OF THE PERSON NAMED IN COLUMN TO PERSON NAMED IN CO | WENT | No Yes. Fill in the o | details below. | | | | |
| | | | | | Date issued | | |
| | | Name | | | MM/DD/YYYY | | |
| | | Number Str | reet | | manusan and a discontinuous de la contraction de | | |
| | | City | State | Zip Code | 9 | | |
| Part 1 | 2: | Sign Belov | v | | | | |
| ar | id co | orrect. I under uptcy case ca | stand that makin | g a false state p to \$250,000, | ment, concealing prope | achments, and I declare under penalty of perjecty, or obtaining money or property by fraud to 20 years, or both. 18 U.S.C. §§ 152, 1341, 19 | in connection with a |
| | | · | ate 5/17/2016 | 10 | | Date Design 2 | |
| Di V | d yo | 0 | tional pages to Yo | our Statement | of Financial Affairs for | Individuals Filing for Bankruptcy (Official Fo | orm 107)? |
| Di | d yo | u pay or agre | e to pay someone | who is not an | attorney to help you fil | out bankruptcy forms? | |
| 2 | N | o | | | | | |
| | JY€ | es. Name of pe | rson | | | Attach the Bankruptcy Petition F Declaration, and Signature (Offi | • |



Case 16-16840 Doc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main UNITED CSTRAFTES BARKGRUP POOF COURT

Northern District of Illinois

| In re: | Jacobellis, Beth Ann | Case No |
|--------|---------------------------------------|---|
| • | Debtor(s) | Case INU |
| | | Chapter. Chapter13 |
| | VERIF | CATION OF CREDITOR MATRIX |
| | The above named Debtors hereby verify | that the attached list of creditors is true and correct to the best of their knowledge. |
| Date: | 5/17/2016 | /s/ Jacobellis, Beth Ann |
| | | Jacobellis, Beth Ann ∫ Signature of Debtor |

| Debto | or 1 | Beth Case 16-16840 ADOC 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main First Name Documentume Page 70 of 71 | | | | |
|---|---------------------|--|-------------|--|--|--|
| 16. | Cal | culate the median family income that applies to you. Follow these steps: | | | | |
| | | Fill in the state in which you live. | | | | |
| | | Fill in the number of people in your household. | | | | |
| | | Fill in the median family income for your state and size of household | \$63,896.00 | | | |
| | | To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | | |
| 17. | Hov | v do the lines compare? | | | | |
| | 17a. | Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | |
| | 17b. | Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | | | | |
| ant 3 | (| Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) | | | | |
| 18. | Сор | y your total average monthly income from line 11. | \$5,494.69 | | | |
| 19. | Ded com | uct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the mitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. | | | | |
| | 19a. | If the marital adjustment does not apply, fill in 0 on line 19a. | -\$0.00 | | | |
| | 19b. | Subtract line 19a from line 18. | \$5,494.69 | | | |
| 20. | Calc | rulate your current monthly income for the year. Follow these steps: | | | | |
| 1 | 20a. Copy line 19b. | | \$5,494.69 | | | |
| | | Multiply by 12 (the number of months in a year). | x 12 | | | |
| 2 | 20b. | The result is your current monthly income for the year for this part of the form. | \$65,936.28 | | | |
| 2 | 20c. | Copy the median family income for your state and size of household from line 16c. | \$63,896.00 | | | |
| 21. | woh | do the lines compare? | | | | |
| | | Line 20b is less than fine 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | | | | |
| Ī | | ine 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4. | | | | |
| art 4 | s | ign Below | | | | |
| | | Purisping hore I declars under negative of negitive the table information at the stable informat | | | | |
| | | By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. | | | | |
| | | X /s/ Beth Jacobellis X | | | | |
| | | Signature of Debtor 1 Signature of Debtor 2 | | | | |
| | | Date <u>5/17/2016</u> Date | | | | |
| | | MM/DD/YYYY MM/DD/YYYY | | | | |
| If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | | | | | | |

| Debtor 1 Beth Case 16-16840 First Name | Apoc 1 Filed 05/18/16 Entered 05/18/16 18:50:50 Desc Main Middle Name Documentame Page 71 of 71 | |
|---|--|--|
| Part4: Sign Below | | |
| Sy signing here, under penalty of perjury your light in the signing here. | ou declare that the information on this statement and in any attachments is true and correct. | |
| Signature of Debtor 1 | Signature of Debtor 2 | |
| Date <u>5/17/2016</u> MM/DD/YYYY | Date MM/DD/YYYY | |
| | | |